

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Daniel		09-05-01
O.I.P.E. CLASSIFIER		1029	9/24/09
FORMALITY REVIEW			
RESPONSE F RMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	
1	3/9
2	22/31
3	02/02
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7	✓
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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830  
9/25/01